RECEIVED CENTRAL FAX CENTER OCT 0 7 2004

NORTH AMERICA INTERNATIONAL PATENT OFFICE

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

TEL:+886-2-8923-7350

FAX: 806-498-6673

e-mail:winstonhsu@naipo.com

FAX TO: LABAZE, EDWYN

ART UNIT: 2876

Tel: (571) 272-2395

Fax: (703) 872-9306

FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526

SERIAL NO.: 10/064,777

ATTORNEY DOCKET NO.: CMOP0023USA

SUBJECT: RESPONSE TO OFFICE ACTION MAILED ON 05/07/2004

TOTAL PAGES: 45 PAGES (INCLUDING COVER PAGE)

Winston Hsu 2004/10/07

CMOP0023USA0_A2_2

PTO/SB/97 (09-04)
Approved for use through 07/31/2006. DMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office 10/07/2004 Date Celia Hsieh Typed or printed name of person signing Certificate 886-2-8923-7350 Registration Number, if applicable Telephone Number Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper. (1) Transmittal Form 1 PAGE 1 PAGE (2) Fee Transmittal (3) Response to Office Action 41 PAGES

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

					Approved for use	a through 07/31/200	PTO/SB/21 (09-04) B. OMB 0651-0031	٠
Under the Pe	aperwork Reduction Act of 1995	. no person	is are required to respond to a co	Patent and T liection of inf	rademark Office;	U.S. DEPARTMENT	FOF COMMERCE	
TRANSMITTAL FORM (to be used for all correspondence after Initial filing)			Application Number	4,777	RECLIVED			
			Filing Date	2002)2		AX CENTE	
			First Named Inventor Hsin-Ta Lee				222 23 0001	
			Art Unit	2876			Util	/ ZUU9
			Examiner Name LABAZE, EDWYN			/Ν	· · · · · · · · · · · · · · · · · · ·	
	of Pages in This Submission	43	Attorney Docket Number	CMO	20023USA	1)
		ENC	LOSURES (Check all	that apply	r)			1
Fee Tran	nemittal Form		Drawing(s)			Allowance Comm	unication to TC	
F	Fee Attached	Licensing-related Papers				al Communication peals and Interfer		
Amendm	nent/Reply		Petition			el Communication		
After Final			Petition to Convert to a Provisional Application			Proprietary Information		
	Midavite (dadaration (e)		Power of Attorney, Revocation Change of Correspondence A		Statu	s Letter	-	
Affidavits/declaration(s)			Terminal Disclaimer	-courcess	Othe	Enclosure(s) (please lde	sase Identify	
-	n of Time Request	Request for Refund			belov	v):	• •	
Express	Abandonment Request							
Information Disclosure Statement		CD, Number of CD(s)					Victorial Section	-);-
			Landscape Table on CI)	<u> </u>			ļ
Certified Documer	Copy of Priority	Rema	rks				,	Ì
	Missing Parts/							
Incomple	ete Application							
	Reply to Missing Parts Inder 37 CFR 1.52 or 1.53							l ·
•			•					
,	SIGNA	TURE C	OF APPLICANT, ATTO	RNEY, C	R AGENT	···		1
im Name		North	America Intellectua	l Prope	erty Corpo	ration		
Signature			Weiston	Lars]
rinted name			Winston H	I su				
Date	10/7/2004			Reg. No.		41,526]
	С	ERTIFIC	CATE OF TRANSMISS	ION/MAI	LING			· ·
hereby certify the sufficient postage he date shown b	e as first class mall in an en	eing fecsi velope ad	mile transmitted to the USPT dressed to: Commissioner for	O or depos r Patents, I	ited with the U P.O. Box 1450,	nited States Posta Alexandria, VA 2	al Service with 2313-1450 on	
Signature								
					Date			
Typed or printed	лалте					1		7

This collection of information is required by 37 CFR 1.5. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Complete if Known	Under the Paperwork Reduction Act of 1995, no persons are reput	ired to i	respond	U.S. P	atent e	nd Tredemari	d for use through k Office; U.S. DE	h 07/31/2006. () FPARTMENT ()	COMMEDAT	
### Application Number 10/064,777 Filing Date 03/16/2002										
First Named Inventor Hisin-Ta Lee Examiner Name LABAZE, EDWYN	FEE IKANSMILIA	L	· · · ·			4 4				
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 430.00 Antumire Name LABAZE, EDWYN	for EV 2005		Filing Date		08/16	08/16/2002				
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 430.00 Art Unit 2876 Art Uni			First Named Inventor		ntor Hsin-	Hsin-Ta`Lee				
Applicant claims small entity status, See 37 CFR 1.27 Antonicy Docket No. CMOPPO23USA		l .				LABA	LABAZE, EDWYN			
METHOD OF PAYMENT (check all that apply) Check Money Other None Check Money O	Applicant claims small entity status, See 37 CFR 1.27	***								
Check	TOTAL AMOUNT OF PAYMENT (\$) 430.00									
Deposit Account Deposit Account Solution Soluti	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Deposit Account Deposit Account Sol 3105 Sol 31	Check Credit card Money Other None	3. ADDITIONAL FEES								
Code (f)										
North America Intellectual Property Corp. The Director in authorized to: (check at that aroly) Charge fee(s) indicuted below Crostil any overpayments Charge fee(s) indicated below Crostil any overpayments Charge fee(s) indicated below Charge fee(s) indicated fee(s) or any underpayment of fee(s) Charge fee(s) indicated below, excest for the filting fee to the above-identified deposit account. The above-identified deposit account. The control of the property of the filting fee 1804 1905 1,840* 1805 1,84						Fe	e Description	l	Fee Paid	
Account North America Intellectual Property Corp. North America Intellectual Property Corp.	Number	•			65	Surcharge - k	ate filing fee or o	eth .		
The Director is authorized to: (check all that apony) Charge fee(s) indicated below Charge fee(s) indicated below Charge fae(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to: (check all that apony) Charge fae(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to the above indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to check all that apony) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to check all that apony) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to check all that apony) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized to check all that apony) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. The Director is authorized fee check all that apony) The Director is authorized fee check all that apony) The Director is presented to the present of exparts reaxamination of the presenting and the presenting and the presenting and the present of the	Account North America Intellectual Property Corp.	1052	2 50	2052	25	Surcharge - k cover sheet	ete provisional fi	ling fee or		
Charge any additional field or any underpayment of feeld				ī		_	•			
Charge fave(s) indicated bedow, except for the filting fee to the above-identified deposit account. 1251 110 2251 55 Extension for reply within first month 1252 430 2252 215 Extension for reply within first month 1253 980 2253 490 Extension for reply within second month 1254 1530 2254 766 Extension for reply within first month 1254 1530 2254 766 Extension for reply within first month 1254 1530 2254 766 Extension for reply within first month 1255 2,080 2253 490 Extension for reply within first month 1255 2,080 2253 490 Extension for reply within first month 1255 2,080 2253 490 Extension for reply within first month 1255 2,080 2255 1,040 Extension for reply within first month 1255 2,080 2255	Charge fee(s) indicated below Credit any overpayments		ŕ				•			
Total Claims		1804	920^	1804	920-	Examiner act	ublication of SIR Ion	prior to		
1. BASIC FILING FEE Large Enithy Small Entity		1805	1,8401	1805	1,840*	Requesting p Examiner act	publication of SIR Non	t after		
1. BASIC FILING FEE 1259 1860 1254 1.530 1254 1.530 1254 1.530 1255 1.630 1.630	FEE CALCULATION	1251	110	2251					400	
Feb Fee									430	
Code (\$)										
1002 350 2002 175 Design filing fee 1401 340 2401 170 Notice of Appeal 1003 550 2003 275 Plant filing fee 1403 300 2403 150 Request for oral hearing 1005 160 2005 80 Provisional filing fee 1403 300 2403 150 Request for oral hearing 1451 1,510 150 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unanvoidable 1453 1,330 2453 665 Petition to revive - unanvoidable 1453 1,330 2453 665 Petition to revive - unanvoidable 1453 1,330 2453 665 Petition to revive - unanvoidable 1454 1,330 1455 1	Code (\$) Code (\$)							•		
1003 550 2003 275 Plant filling fee 1402 340 2402 170 Filling a brief in support of an appeal 1004 790 2004 305 Relasue filing fee 1403 300 2403 150 Request for oral hearing 1451 1,510 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unavoidable 1452 110 2452 55 Petition to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to revive - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to review - unavoidable 1501 1,370 2501 685 Britting to authrision of review - unavoidable 1501 1,				ŀ			•	month		
1403 300 2403 150 Request for oral hearing 1403 150 1405 1500 1500 1405 1500 1600										
SUBTOTAL (1) (\$) 0.00 1451 1,510 Petition to institute a public use proceeding SUBTOTAL (1) (\$) 0.00 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional 1451 1,510 Petition to institute a public use proceeding 1453 1,330 2453 665 Petition to revive - unintentional 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1504 1453 1,330 2453 665 Petition to revive - unintention 1505 1450 1450 1450 1450 1450 1450 1450						-		appear		
SUBTOTAL (1) (\$) 0.00 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unimitantional 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Fee from Fee Paid 1501 1,370 2501 685 Utility issue fee (or reisaue) 1502 490 2502 245 Design issue fee 1503 690 2503 330 Plant issue fee 1460 130 1460 130 Petitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1,17(q) 1808 180 1806 180 Submission of Information Disclosure Stmt Fee Fee Fee Fee Fee Fee Fee Fee Code (\$) 1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claims in excess of 3 1204 88 2204 44 "Reliause Independent claims over original patient Over original patient Subtotal 1205 18 2205 9 "Reliauce Independent claims over original patient Subtotal 1206 18 2205 9 "Reliauce Independent claims over original patient Subtotal 1207 1802 1802 900 Request for continued Examination (RCE) 1208 1802 900 Request for expedited examination 1209 1802 900 Request for expedited examination of a design application 1209 1802 900 Request for Examination Of a design application 1209 1802 900 Request for expedited examination Of a design application 1209 1802 900 Request for Examination Of a design application Of a design application Of a design application Of a design application 1209 1802 900 Request for Examination Of a design application No. (Complete (*applicable))							_	se proceeding		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Fee Paid Total Claims		1452	110	2452						
Total Claims		1453	1,330	2453	685	Petition to rev	vive - unintention	al .		
Total Claims	Fee from		•							
Independent		ł .					r			
Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Description 1806 180 1806 180 Submission of Information Disclosure Stmt 1807 50 Processing fee under 37 CFR 1.17(q) 1806 180 Submission of Information Disclosure Stmt 1808 180 1806 180 Submission of Information Disclosure Stmt 1802 1802 1802 1802 1802 1802 1802 1802	Independent 344	•						<u>_</u>		
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee F	Multiple Dependent			- •			· · · · · · · · · · · · · · · · · · ·			
Code (\$) Cod						_		1 ''		
1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claims in ot paid 1204 88 2204 44 ** Relsaue Independent claims over original patent 1205 18 2205 9 ** Relsaue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 0.00 **Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 430.00 SUBMITTED BY Registration No. (Attorney/Agapt) Attorney/Agapt) Attor		ŀ	- 1		40	Recording ea	ch patent assign	ment per		
1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claims in order original patent 1204 88 2204 44 **Relasue Independent claims over original patent 1205 18 2205 9 **Relasue claims in excess of 20 and over original patent 1206 18 2205 9 **Relasue claims in excess of 20 and over original patent 1207 18 2205 9 **Relasue claims in excess of 20 and over original patent 1208 18 2205 9 **Relasue claims in excess of 20 and over original patent 1209 18 2205 9 **Relasue claims in excess of 20 and over original patent 1209 18 2205 9 **Relasue claims in excess of 20 and over original patent 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a design application 1200 1802 900 Request for expedited examination of a de					!	property (time	ss number of pro	perties)		
1204 88 2204 44 ** Relsaue Independent claims over original patent 1801 790 2801 395 Request for Continued Examination (RCE) 1802 900 Request for expedited examination of a design application 1802 900 Reduced by Basic Filing Fee Paid Subtotal (3) (\$) 430.00 Submitted by Winston Hsu Registration No. (Attorney/Agent) 41,526 Telephone 886-2-89237350	1201 88 2201 44 Independent claims in excess of 3	1008	/ Bu	2009	095	(37 CFR 1.12	19(a))	rejection		
aver original patent 1801 790 2801 395 Request for Continued Examination (RCE) 1205 18 2205 9 ** Relssue daims in excess of 20 and over original patent SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater; For Relssues, see above SUBMITTED BY Registration No. (Attorney/Agent) 1801 790 2801 395 Request for Continued Examination (RCE) 1802 900 Request for expedited examination of a design application Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 430.00 (Complete (# applicable)) Registration No. (Attorney/Agent) **Reduced by Basic Filing Fee Paid Substitute (**) **Complete (**) **Complete (**) **Complete (**) **Complete (**) **Complete (**) **Complete (**) **Telephone 886-2-89237350		1810	790	2810	395	For each add	ittonal invention	to be		
1205 18 2205 9 ** Relssue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater; For Relssues, see above SUBMITTED BY Name (Print/Type) Winston Hsu 1802 900 1802 900 Request for expedited examination of a design application Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 430.00 Registration No. (Atomev/Agent) 41.526 Telephone 886-2-89237350		1801	790	2801		_		instion (RCE)		
SUBTOTAL (2) (\$) 0.00 *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$) 430.00 *SUBMITTED BY *Complete (if applicable)) Name (Print/Type) Winston Hsu Registration No. (Attorney/Agent) 41.526 Telephone 886-2-89237350		1802			900	Request for	expedited exami			
**Or number previously paid, if greater; For Relsaues, see above ** SUBMITTED BY Name (Print/Type) Winston Hsu Registration No. (Attorney/Agent) 41,526 Telephone 886-2-89237350		∱4ha.	1 160 /68	المنظمة ا		of a dealgn a	pplication			
SUBMITTED BY Name (Print/Type) Winston Hsu Registration No. (Attorney/Agent) (Complete (# applicable)) Telephone 886-2-89237350			-		iling Fe	e Pald	\$UDTOTAL 4	2) (4) 420		
Name (Print/Type) Winston Hsu Registration No. (Attorney/Agent) 41,526 Telephone 886-2-89237350	To halfiber previously paid, it globaler, For Abisabes, see above									
/Attorney/Agent) 41,526 /EEpinone 686-2-6923/350		Registration No								
						∠0				

WARNING: Information on this form may become public. Cradit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of Information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.